#### EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? UNITED STATES HOUSE OF REPRESENTATIVES TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? C. Did you or your spouse have "earned" income (e.g., salanes, honoraria, or pension/IRA distributions) of \$200 or more during the Name: FINANCIAL DISCLOSURE STATEMENT EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent child because they meet all three tests exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. reporting period? A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the FILER STATUS end of the reporting period? or b. Receive more than \$200 in uneamed income from any reportable asset during the reporting period? B06 **Employing Office:** U.S. House of Representatives Candidates - Date of Election: New Officer or Employee New Member of or Candidate for Kacketh THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" District: State: \_ オト Shared Staff Filer Type (If Applicable): řes X ěs × Yes Daytime Telephone: For New Members, Candidates, and New Employees Principal Assistant Š Š **8** X J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? FORM B ð Period Covered: January 1, Check if Amendment A \$200 penalty shall be assessed against any individual who files more than 30 days late. POSTMARY ILLEGIBLE U.S. HOUSE OF REPRESENTATIVES LEGISLATIVE RESOURCE CENTE: ਠੁੱ (Office Use Only) 18 KAY -1 PH 1: 15 Yes Yes ĕ Yes Yes Page 1 of 7 ž š Š ö Š X X

## SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Exclude: Your personal residence, including second roomes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publidy traced, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete address or description, e.g., rental property," and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.	For all IRAs and other retrement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	production of income and with a fair market value use a valuation method of exceeding \$1,000 at the end of the reporting period, specify the method used and (b) any other reportable asset or source of income if an asset was sold of which generated more than \$200 in "unearned" included only because it income during the year.  Provide complete names of stocks and mutual funds "Column M is for assets (do not use only ticker symbols).	Assets and/or income Sources	BLOCK A	
0.			>>		production of income and with a fair market value use a valuation method other than fair market value, please that generate tax-deferred income (such as exceeding \$1,000 at the end of the reporting period, specify the method used.  ADI(IX), IRA, or 529 accounts, you may desk and (IX) any other reportable asset or source of income if an asset was sold during the reporting period and is the "Tax-Deferred" column. Dividends, which generated more than \$200 in "unearmed" included only because it generated income, the value should interest, and capital gains, even if income during the year.  The production of the reporting period and is the "Tax-Deferred" column. Dividends, which generated more than \$200 in "unearmed" included only because it generated income, the value should reinvested, must be disclosed as income be "None."  To reserve the dividuals hands "Column M is for assets held by your spouse or dependent "None" if the asset generated no income (do not use only ticker symbols).	Value of Asset  Indicate value of asset at close of the reporting period. If you	BLOCKB	
g., Partnership Inoc	ome or Farm Inc.	ome)			that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividedrak, interest, and capital gains, even if retirvested, must be disclosed as income for assets held intaxable accounts. Check "None" if the asset generated no income during the reporting period.	Type of Income Check all columns that apply. For accounts	BLOCK C	
000*				Current Year Preceding Year	that generate tax-deferred income (such as assets indicate the category of income by checking the appropriate box below. Dividends, interest, and 401(k), IRA, or 529 accounts), you may check capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts, the "Tax-Deferred" column. Dividends, Check "None" if no income was earned or generated.  Interest, and capital gains, even if Column XII is for assets held by your spouse or dependent child in which you have no interest. For assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.	Assets and/or income Sources  Value of Asset  Type of Income  Amount of Income  Amount of Income	BLOCK D	

Use additional sheets if more space is required.

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Jega Corp Stock

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if you so choose, you may indicate that an asset o income source is that of your spouse (SP) o dependent child (CC), or jointly held with anyone (JT in the optional column on the far left.

you have a privately-traded fund that is an Excepte nvestment Fund, please check the "EIF" box

For a detailed discussion of Schedule A requirements please refer to the instruction booklet.

\$1-\$1,000 \$1,001-\$15,000

\$15,001-\$50-000 \$50,001-\$100,000 \$100,001-\$250,000 \$250,001-\$500,000

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Spouse/DC Innome over \$1,000,000\*

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Spouse/DC Asset over \$1,000,000\*

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Bob Rackleft

Page 3

### SCHEDULE C - EARNED INCOME

Name: 1306 Ruck 12ft Page 4 of 7

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

		Am	Amount
Source (include date of receipt for honoraria)	Туре	Current Year to Filing	Preceding Year
ABC Yrade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples: State of Maryland Cod. 2)	Spouse Speech	\$20,000	\$1,000
L	Spouse Salary	NA	N/A
State of Florida Retirement System	pension	9,000	36,000
•			

#### SCHEDULE D - LIABILITIES

	Name:
THE PERSON NAMED IN COLUMN NAM	1501 Ruckleft
	Page 5 of

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

E, e	Example				
	First Bank of Wilmington, DE				
	5498	7	Date		
Type of Liability					
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		m	μ	Amount of Liability	
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#### SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting

period and the current calendar year. rirst-year candidate	period and the current calendar year. First-year candidates and new employees report positions from the current calendar year and two previous years.
Position	Name of Organization
None	
	The state of the s

#### SCHEDULE F - AGREEMENTS

Name: Bob Rack leff Page 6 of 7	
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employer.
continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former
Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service;

Date	Parties to Agreement	Terms of Agreement
	None	
:		

# SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. any enterprise in any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

government an	nd any information considered confidential as a result of a	government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on schedule C.
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services

FILER NOTES (Optional)

Name: Bob Racklett

Page 7 of 1

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